

Supplemental Application Data Sheet**Application Information**

Application Number:: 10/763,885
Filing Date:: 01/23/2004
Application Type:: Regular
Subject Matter:: Utility
Suggested Classification:: None
Suggested Group Art Unit:: None
CD-ROM or CD-R?:: No
Title (line one):: MATERIALS AND METHOD METHODS
Title (line two):: FOR IMPRINT LITHOGRAPHY
Attorney Docket Number:: ~~P113/MH 79-61-03~~ P113-55-03
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 6
Total Drawing Sheets:: 3
Small Entity?:: No
Petition Included?:: No
Secrecy Order in Parent Appl.?:: No

Inventor Information

First Applicant Authority Type:: Inventor
Primary Citizenship Country:: United States
Status:: Full Capacity
Given Name:: Frank
Middle Name:: Y.
Family Name:: Xu
City of Residence:: Austin
State or Province of Residence:: TX
Country of Residence:: United States

Street of mailing address:: 2811 La Frontera Blvd. #721
City of mailing address:: Austin
State or Province of mailing address:: TX
Postal or Zip Code of mailing address:: 78728-1187

Second Applicant Authority Type:: Inventor
Primary Citizenship Country:: United States
Status:: Full Capacity
Given Name:: Pankaj
Middle Name:: B.
Family Name:: Lad
City of Residence:: Austin
State or Province of Residence:: TX
Country of Residence:: United States
Street mailing address:: 2920 Thrushwood Drive STE A
City of mailing address:: Austin
State or Province of mailing address:: TX
Postal or Zip Code of mailing address:: 78757-6969

Third Applicant Authority Type:: Inventor
Primary Citizenship Country:: United States
Status:: Full Capacity
Given Name:: Ian
Middle Name:: M.
Family Name:: McMackin
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State or Province of Residence:: TX
Country of Residence:: United States
Street mailing address:: 7700 N. Capital of Tx Hwy #817
City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78731-1175

Correspondence Information

Correspondence Customer Number:: ~~None~~25108

Name Line One:: Molecular Imprints, Inc.

Name Line Two:: Legal Department

Address Line One:: P.O. Box 81536

City:: Austin

State or Province:: TX

Postal or Zip Code:: 78708-1536

Telephone:: ~~(512) 527-0104~~(512) 339-7760

Fax:: ~~(512) 527-0107~~(512) 491-8918

Electronic Mail:: ~~None~~ekbrooks@militho.com

Representative Information:: None

Domestic Priority Information:: None

Foreign Priority Information:: None

Assignee Information

Assignee Name:: MOLECULAR IMPRINTS, INC.

Street of mailing address:: 1807-C West Braker Lane

City of mailing address:: Austin

State or Province of mailing address:: TX

Postal or Zip Code of mailing address:: 78758